



Alaska Primary Care
ASSOCIATION

Date:

Client Name:

Client ID:

Clients Primary Goal(s):

1.

2.

Actions to take to reach the health goal are:

Will do this _____ times/week for_____

One a scale of 1-10, confidence completing this plan is _____

Resources (internal and external) that will help to reach the goal are:

Challenges that may get in the way are:

Ways to overcome or resist these challenges are:

Referrals Provided:

Next Meeting:

